FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM

DR-2 DISCLOSURE (Rev. 12/2005) REPORT COMMITTEE NAME (Must be same as on Statement of Organization) Central Committee For Office Use Only IMPORTANT: Indicate by # type of committee you are reporting for: Logged In (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party Scanned M (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC Computer (11) Local Ballot Issue Audited CANDIDATE COMMITTEES ONLY: Candidate Name Political Party (if applicable) Office Sought District (if Senate or House) Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate committee and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. SIGNATURE OF PERSON FILING REPORT TELEPHONE May 19, 20,0 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR.

(report date) Indicate by # 2 Local Committees, enter Date of Election CHECK IF AMENDMENT TO REPORT DATED County & Local Committees, enter County in Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)...... Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)...... CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$ **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ CONSULTANT BREAKDOWN (Schedule G Attached?) **CANDIDATE COMMITTEES ONLY:** VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Org	
	central
Focahontas Co. Republican	Committee

SCHEDULE A (Rev. 02/96)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (if applicable) (MM/DD/YR) PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER APPLICATION SHIP TO CANDIDATE* (if applicable) APPLICATION SHIP TO CANDIDATE (if applica
3/2/2010 CK# 7/1/Ke Discher - 5/1 W. Elm Are Pocahontos, IA - 50574 > 35.00 3/2/2010 CK# Rolfe, IA 5058/ 3/2/2010 ID# Rolfe, IA 5058/ 3/2/2010 ID# CASH- Total Danstons
3/2/2010 CK# 7/1/Ke Discher - 5/1 W. Elm Are Pocahontos, IA - 50574 > 35.00 3/2/2010 CK# Rolfe, IA 5058/ 3/2/2010 ID# Rolfe, IA 5058/ 3/2/2010 ID# CASH- Total Danstons
3/2/2010 CK# TILLE Discher - 511 W. Elm Ave Pocahontas, IA - 50574 3/2/2010 CK# Pocahontas, IA - 50574 Kyle Brinkman - CK# Polfe, IA 50581 3/2/2010 ID# CASH - Total Donations
CK# 511 W. ElmAre Pocahontos, TA - 50574 3/2/2010 D# Kyle Brinkman - 49353 3804h Ave 35.00 3/2/2010 D# Polite, TA 5058/ 35.00
3/2/2010 CK# Kyle Brinkman - 149353 3804h Ave > 25.00 3/12/2010 ID# CASH- Total Donation
3/12/2010 1D# CASH- Total Donations
3/12/2010 " CASH- Total Donotions
CK# at Co. Convention 1/9.00
4/30/2010 ID# Margaret Nomann - 56579
CK# 2484MAVE, Palmer, TA
3/2/2010 ID# Chris Archer, Fonda, IH \$40.00
CK# S0540 40.00 Margaret Nomann-above \$40.00
3/2/ 2010 D# Phil Sundblad- 49/06 100th A/D 00
3/12/2010 ID# Norma Halverson, Laurens
3/12/2010 Norma Halverson, Laurens 40.00
3/2/2010 10# Mike Discher - 511 W.
CK# Elm Ave, Pocahontas, 1/4 40.00
110/ D# CACH 1 50574
3/2/2010 CK# CASH from Straw Polks Shaw-Richards, Forum \$100.00
SUB-TOTAL & COLUMN

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ____ of ____

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 02/96)	MONETARY EXPENDITURES
_	CK THIS BOX IF

COMMITTE	E NAME (Must be s	same as on Statement of Organization)		
		D la l C agentital		
100	cahontas	Co. Republicans NAME AND ADDRESS TO WHOM EXPENDITURE		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	(Disbursement) WAS MADE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
1/22/10	ID# CK# //55	Laurens City Hall- 272N, 3rd St, Laurens, FA 50554	rent for Caucus	\$ 55.00
//82/10	CIGH // J G	Laurens, IA 50554 Rolfe City Hall - 319 Garfield Rolfe, IA 50581	rent for caucus)	
2/22/10	115 1	Pocahontas Rec-Democrat 218 N. Main Pocahontas, IA-50574	ADS for Convention	120,40
3/23/10	ID# CK# //58	US Post Office Pocahontas, IA- 50574	Stamps	17.40
2/22/10	0.0.770	Pocahontas Library 14 and five NN Pocahontas, IA-50574	copies	\$ 8.00
3/4/10	CK# //40	Casey's Convenience Store	CONVENTION	
3/12/10	ID# CK# //6/	Pocahontas, IA-50574 Rep. Party of IA Des Moines, IA.	5-Delegate Registrations	200,00
			SUB TOTAL	· C

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"HIS BOX APPLIES TO CANDIDATES' COMMI	ITEES ONLY

Campaign funds may be used only for:

- (1) campaign purposes,
- (2) constituency expenses, and
- (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	of
	(for Schedule B)

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Poca honfas Co Republican Committee

SCHEDULE		
E	IN KIND	
(Rev. 02/96)	CONTRIBUTIONS	
CHECK THIS BOX IF AMENDING FORM		

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE
	None for this period.			*
SUB-TOTAL				\$
		TC	OTAL (if last page of this schedule)	\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____ (for Schedule E)